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SERIAL NUMBER 10/616,864	FILING DATE 07/09/2003 RULE	CLASS 600 604	GROUP ART UNIT 3763	ATTORNEY DOCKET NO. 170134.401C1
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APPLICANTS

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** CONTINUING DATA *****

This application is a CIP of 10/039,240 01/04/2002 ABN

** FOREIGN APPLICATIONS *****

none

IF REQUIRED, FOREIGN FILING LICENSE GRANTED ** SMALL ENTITY **

** 10/16/2003

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY WA	SHEETS DRAWING 13	TOTAL CLAIMS 40	INDEPENDENT CLAIMS 13
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after allowance	EXAMINER'S SIGNATURE 	INITIALS 		
Verified and Acknowledged				

ADDRESS

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TITLE

Spinal needle system

FILING FEE RECEIVED	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)